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ENT/INVESTIGATION REPORT IN.

By: LAWSONJW, VENIL-104 10/24/2006

Page 2 Richmond Police Department 2006-10140633 1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown **IBR** Status Quantity Type Measure Suspected Type Up to 3 types of activity D R U G S

Assisting Officers

Suspect Hate / Bias Motivated: None (No Bias)

NARRATIVE

Victim stated that an unknown person may have entered her house.

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	. TORTING OFFICER NARRATIVI	OCA
Richmond Police Department		2006-10140633
Victim	Offense	Date / Time Reported
SERENE, ISARA ISABELLA	SUSPICIOUS SITUATION/PERSON	Sat 10/14/2006 16:32

THE INFORMATION BELOW IS CONFIDENTIAL - FOR USE BY AUTHORIZED PERSONNEL ONLY

Victim stated that an unknown person may have entered her house using a spare key on her back deck. She stated that she has had several problems with her ex-husband for the past sever years, and has had a protective order on him from some time. when her friend went to her house today, several items had been moved, and the key was missing from the porch. Nothing was missing from the house, and the doors were locked.

RUNAWAY / MISSING PERSONS Document 53-11 Filed 10/01/10 Page 3 of 6

05/17/2000	Initial / Modif	y					and and State of the second	Entered:	<u> </u>
*Incident # 2006 10	240029		*Reporting Officer	ζ K,	5591	AL :	*Officer Code # 1576	Runaway (901) Missing Person	(90B) Page #
Date, 10/24		Report Time	*Investigating /	Agency & Telep	hone Number (24 / Crimes Uni	Hour Number)	6716	Agency ORI VA1220010	OCA#
THE ASSESSMENT OF THE PERSON	act Name	RENE		*First Nam		DOMINIK	*Middle Name	-IEZER	Suffix
*Race W/B/I/A/U	W Ethnic H / N	N *Sex N	SSN		OLN		OL State	OL Expiration Date	
*DOB	*Emancipati		Country of B		f Birth *City/Cou	nty of Birth	*Mother's Maiden Name	e (If birth state is VA)	
Height (low range)		Color - Hair/Eye	Skin 1	one	Location (BOTH) Both	Body Part (ÁNKL) Ankle	(FHD) Fo	prehead + (WRS)	Wrist
*Weight (low range)	Weight (high range)	(BLN) Blonde/Strawl (BLU) Blue (BRQ) Brown (GRY) Gray	(LGT) F	air/Light Medium	(F) Front (B) Back (LOW) Lower (UP) Upper	(ARM) Arm (BACK) Back (BRS) Breas (BUT) Butto	(GROI) Gr (HND) Ha st (HEAD) He	roin (UNK) and (OTH) Other	Unknown er
*Hair Color	10	(GRN) Green (RED) Red (WHI) White			(R) Right (LR) Lower Right (UR) Upper Right	(CHK) Chee	k (LEG) Le VTorso (LIP) Lip		
*Eye Color	BILIN	(UNK) Unknown (OTH) Other	SMT T (SC) Sc (MRKS (TAT) T	ars Marks	(L) Left (LL) Lower Left (UL) Upper Left	(EAR) Ear (ELB) Elbow (EYE) Eye/E	(NOSE) No (SHLD) Sh	ose roulder omach/Abdm/Belly Button	
Skin Tone	B, L, V L, G, T		(PRCD)	Piercing Amputatns	(UNK) Unknown (OTH) Other	(EYEB) Eyebr (FACE) Face (FGR) Finge (FOOT) Foot	(THGH) Th	e the same of the	
*Name of School I			ks,Tattoos pe	Locatio	an .	Body Part	Description		
				tiRi.	1 1 1	EAR		AR PIERCED	
School Location (0	City, State)								
	NAME AN			1 1 1	<u> </u>			•	
Homa Street #	Home Str	eet Name		Apt#		City, State, Zip		Home Dhone	
					************	RICHMON	0, VA 2	Home Phone	
*Date of Last Cont		Missing / Runaway Before Y / N	Number T Missing / F	mes Runaway	ls Subject Drug Us	er Y / N	Missing From		-
Last Seen in the C	ompany of: (Name	es and Addresses)	AVID B	USH	AGE	40 DUB		Sex M/F	Race W/B/I/A/U W
								Sex M7F	Race W/B/I/A/U
							P	Sex M/F	Race W/B/I/A/U
*Miscellaneous Info (Check All That Ap	ormation D	Body X-Rays Available Circumsized	a A	Fingerprints Av ootprints Availa	rallable <u>Blood T</u> able (1)	ype: O Pos (4) A Neg O Neg (5) B Pos	(7) AB Pos	Fingerprint Classificat	ion
		Dental X-Rays Available Dental Models/Photos A	By 10 3000 2 4 200 15 1 1 1 1	Medication Ava Current Photo	mania (2)	O Neg (5) B Pos Á Pos (6) B Neg	(8) AB Neg (9) Unk		
Vision Prescription		Contacts .	Jewelry Type				elry Description		
MISCELLANEOUS	DATA (Information	n which may assist in ide	entificaiton: nicknam	e, associates, c	direction of travel, h		Fr EAR F of medication(s). Contin	UER CEP uue in Narrative on next page)
MICKNA		Y							
BIRTH		E: SKYI	ER RI	TINE	BUSH	00	B		Y
		FIR	.51	MID	LAST				
*The foll	owing section	MUST be comple inia State Law (Ri	ted and signed	according t				rson Age 18 or Over	
1 c 1 perúly (ne pera 1 havá furnished	and described in this	(Aport is missing and un to the best of my knowled	Legans of age at	od that the Inform	nation Check	the person described in Applicable Condition:	this report is missing.		*
	.1 ~		,	K SIGA	Di			ysical/mental disability or is	senile thereby
- Listely	ella Jen	2012 Date	4106 L	nother	∑ En		•	immediate danger. ices indicating his/her physic	cal safety is in
h. missing.	y and wanter they	Melal to use photographs death nacessary in attac	s and/or eny other ide mpting to locate the p	entifying informa- recon) am repo	l golpic		ssing under circumstan	ces indicating the disappea	rance was not
have the legal right	I am the natural pa tht to sign this author	went end/er lagat guerdle vilzation and consent.	in of the person ham	ed in this report		untary. 😞			
125al	ella De	ene 10	bykic a	nother		2 8 8 82	t = 1		
Signa	ature	Date	Relation			Signature	D	Pate Relation	onship

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05/17/2000 Initial / Modify		Entre united to the Asset		(c) = ==================================	E 204 1 / 40 h h miles and more		a			Enter	ed:	
*Incident # 200610240027	10610240027 *Reporting Officer MARK K						*Officer Code #			Runaway (901) Missing Person (90)		Page #
Pate 10/24/06		*Investig		ephone N	umber (24	per (24 Hour Number)			Agency VA12	ORI 20010	OCA#	
1/6- C 4 +1 -1 11	ERENÉ		*First Na		EFA	NO	*	Middle Name	1.0	0.1	Suffix	
*Race W/B/I/A/U W Ethnic H/N	N *Sex N	SSN			OLN	NU		OL State		CHET Expiration Date		
*DOB *Emancipatio	in Date	Count		of Birth		nty of Birth	*Mother	's Maiden Name	(If birth s	state is VA)		
Height thigh range	7 > 0 // Color - Hair/Eye	U	Skin Tone	Locat	OCCUPATION AND ADDRESS OF THE PERSON NAMED IN	-5 BORD Body Part						
5'0" 5'0"	(BLK) Black (BLN) Blonde/Strav (BLU) Blue	vberry (I	ALB) Albino DRK) Dark	(BOTH).Both nt	(ANKL) Ank (ARM) Arm	n	(GROI) Gro		(WRS) (UNK)	Unknown	1
range) 9 6	(BRO) Brown (GRY) Gray (GRN) Green	1)	LGT) Fair/Light MED) Medium OTH) Other	(B) Bar (LOW) (UP) U	Lower pper		ast tocks	(HND) Har (HEAD) Hea (KNEE) Kne	ad ee	(OTH) C	iner	
*Hair Color BRO	(RED) Red (WHI) While	Ī	MT Type	(UR) U	ower Right pper Right	(CHIN) Chir	es/Torso n	(LEG) Leg (LIP) Lips (NECK) Nec	* *			
*Eye Color	(UNK) Unknown (OTH) Other) (s (N	SC) Scars MRKS) Marks FAT) Tatloo	(UL) U	wer Left oper Left				ulder	dm/Belly Button		
Skin Tone		(F	PRCD) Piercing MISS) Amputatns	(UNK) (OTH)	Unknown Other	(EYEB) Eye (FACE) Face (FGR) Fing		(TETH) Tee (THGH) This (TOE) Toe	jh .			
L G T	Sanua Ma	ale Tate				(FOOT) Foo		(TONG) Ton				
Name or School if Suverille		ype	Loca	tion		Body Part		escription				
	-	IIF	AICIÉ		1 1	FACE		LEFT DR				
School Location (City, State)					1 1	TETH		BRACES	01	J TEET	H	
	,				1 1							
Home Street #	et Name		Apt i	#	100	City, State, Zip		2322	6	Home Phone	2	
Date of Last Contact	Missing / Runaway Before Y / N		nber Times ling / Runaway	0		RICHMOWN,	600 - 5000 - 5000	ssing From	-0	1		
10113/06 Last Seen in the Company of: (Name	s and Addresses)				W. E. S. S.	<u> </u>			West, F.	Sex M/F	Race W/B/I/	\[\sum_{10.7}\]
	<i>V</i> #	FAID B	SUSH	AGE	40	DOB		J		Sex M/F	Race W/B/1/	
							(a)			Sex M / F	Race W/B/I/	
*Miscellaneous Information	Body X-Rays Available Dircumsized	"	*Fingerprints /		Blood T			AD 0		M / F gerprint Classific	-308 kg	A / U [
. ×. □	Dental X-Rays Availab Dental Models/Photos	le Available	Footprints Ava Medication Ava Current Photo	vallable	(2)	O Pos (4) A Ne O Neg (5) B Po A Pos (6) B Ne	s (8)	AB Pos AB Neg Unk				
Vision Prescription	Contacts	Jewelry Type				1 .	welry Desc	ription EAR PI	-00	=n		
MISCELL ANEQUE DATA (Information	Glasses											
MISCELLANEOUS DATA (Information	may assist in id	entification: nic	ckname, associates,	, direction	of travel, h	airstyle, clothing, name	e of medica	ation(s). Continu	e in Narr	ative on next pag	ge)	
BIRTH NAME:	STEPH	CADE	ENCE B	8 U S		DOB						
	FIRGT	Mik)	LAT		V 013					Name of Section 1971	
The following section is	AUST be complete	ted and sign	ned according t			*Affida	avit for I	Missing Per	son A	ge 18 or Ov	er	
Virgin 1 certify the person described in this re 1 have furnished is true and correct to the	nia State Law (Ru	inaways). ¿	K PER	on on		the person described		ort is missing.				
Luide intuitation is luid and covinct to	ne pesi of my knowledi	ge and belief.	711 K 569A					dos oscuras abrus	-i!/	4-1 - Jin - L 104	H N	
Z. Zzabella Sero	ne 10/2	19/06	mother		sut	sability: Person Mis ojecting herself/himsel	If or others	to personal or in	nmediate	danger.		
I ize any law antorcamen(offici hove provided in any manner they de	ial to use photographs	and/or any other	er identifying informa the person I am sec-	ortion "	dar	dangered: Person n nger.						- 1
I represent that I am the natural pares	nl Bad/or Jerral guardia			ing	voli	oluntary: Person m untary	nissing und	er circumstance	es indica	ting the disappe	earance was	not
2. Dalla Sere	91100 and consant.	4/06	nother	nd		2 - 200			è è ==		e E a sa	
Signature Signature	Date	Rel	attonship			Signature		Da	te	Rela	ationship	
delice a second of the interest to the second of the secon		O POCTOMORNOS DE POCTO	The state of the s		as per un v	CALIFORNIA CONTRACTOR OF THE STATE OF THE ST						

Case 2:07-cv-04936-MAM Document 53-11 Filed 10/01/10 Page 5 of 6 RUNAWAY / MISSING PERSONS

Separate description of the separate services	Modify 0482					Entere	ed;
*Incident#	10029	Reporting Officer MARK K	. SEG	AL :	Officer Code #	• Runaway (90 • Missing Pers	
Date 10/24/06		*Investigating Agency & Telep RPD/Youth & Family			6716	Agency ORI VA1220010	OCA#
Vic Seq # *Last Name		*First Nam	TULLI/	A	*Middle Name AME	115	Suffix
*Race W/B/I/A/U H/N	ic / *Sex	SSN	OLN	7	OL State	OL Expiration Date	
*DOB *Ema	ancipation Date	Country of Birth State of			Mother's Maiden Name	e (If birth state is VA)	
*Height (low range) Height (l	17-2000 high range) <u>Color</u> - Hair/Eye	Skin Tone	A SAY	Body Part			
3' 4" 3' *Weight (low Weight ((BLU) Blue	(LGT) Fair/Light	(BOTH) Both (F) Front (B) Back	(ANKL) Ankle (ARM) Arm (BACK) Back	(GROI) Gr (HND) Ha	nd (OTH) O	Unknown
range) +2	2 (GRY) Gray (GRN) Green	(MED) Medium (OTH) Other	(LOW) Lower (UP) Upper (R) Right	(BRS) Breast (BUT) Buttock (CHK) Cheek	(LEG) Le	ee g	
*Hair Color BR	(RED) Red (WHI) White (UNK) Unknown (OTH) Other	SMT Type (SC) Scars	(LR) Lower Right (UR) Upper Right (L) Left	(CHST) Chest/I (CHIN) Chin (EAR) Ear	(NECK) Ne (NOSE) No	ck se	
*Eye Color B L		(MRKS) Marks (TAT) Tattoo (PRCD) Piercing	(LL) Lower Left (UL) Upper Left (UNK) Unknown (OTH) Other	(ELB) Elbow (EYE) Eye/Eye (EYEB) Eyebrov	elid (ABDM) Sta w (TETH) Tea		
Skin Tone	a T	(MISS) Amputatns	(OTH) Other	(FACE) Face (FGR) Finger (FOOT) Foot	(THGH) Thi (TOE) Too (TONG) Too		
*Name of School If Juvenile	Scars,Marks Type		on	Body Part	Description		
		I EIAIRI		EAR	BOTH E	ARS PIERC	ED
School Location (City, State)	1 1	1 1 1	1 1 1				
F Street # - Ho	ome Street Name	Apt#		City, State, Zip	23226	Home Phone	
*Date of Last Contact	Missing / Rünaway	Number Times Missing / Runaway	TRANSPORT TO THE PROPERTY OF THE PARTY OF TH	RICHMON, VA	Missing From		
Last Seen in the Company of	(Names and Addresses) OAVID BUST			8/13/66		Sex M/F	Race W/B/I/A/U W
	DAME DOST	1 /- 100 1	, , ,	011-704		Sex M/F	Race W/B/I/A/U
-			*			Sex M/F	Race W/B/I/A/U
*Miscellaneous Information (Check All That Apply)	☐ Body X-Rays Available ☐ Circumsized ☑ Dental X-Rays Available	Ö *Fingerprints Av IG *Footprints Avail □ *Medication Ava	able (1)	O Pos (4) A Neg	(7) AB Pos	Fingerprint Classific	
Vision Prescription	Dental Models/Photos Av	vallable : Current Photo	Available (3)	O Neg (5) B Pos A Pos (6) B Neg	(8) AB Neg (9) Unk		
	Glasses	BLUE EX	RRING5			EXARING S	* *
MISCELLANEOUS DATA (Infe	ormation which may assist in ider	ntificalton: nickname, associates, c	direction of travel, ha	airstyle, clothing, name of	medication(s). Continu	ue in Narrative on next pag	je)
7							
BIRTH NAME	SHILOH DE FIRST	SIREE BUSH	Do	B		***************************************	
*The following s	esting MUST he complete	ed and signed according t		*Affidavi	for Missing Per	rson Age 18 or Ove	er
	Virginia State Law (Rus		1 certify	the person described in the	his report is missing.		
Dieron furnishan te mu ano	corrous to the part of my knowledge	e and beller. MK SOGX	2	Applicable Condition:			
72 tabella	Serena 10/20	1/06 nother	∧ sub	njecting herself/himself or	others to personal or in		
have movided in any mann	intent official to USE pholographs are they down necessary in either	end/of any other identifying informet pling to locate the person 1 am repo	tlon I	nger.		ces indicating his/her phys	
in the series that I am the ne	sinisi barent endor, legal guardian	of the person named in this report.	volu	oluntary: Person missi untary.	ing under circumstand	es indicating the disappe	arance was not
2. Isabella	Serence 1012	4/06 mother				a .	
Signalure	Date	Reletionatilp		Signature	Da	ate Rela	ationship

	ME, FIRST NAME, MIDDLE NAME WELL THE ST. NAME, MIDDLE NAME Healing Date/Time	Date: \\ 22.00.	Attoiney K-S. Xe Vor-1. Counsel Determ. HT. WGT. BYES HARD THO Contact Ordered	Mo. DAY YR. FT. IN. 160 HAZ GRYTrial Time: 7.0 7 6 6 00 00 00 00 00 00 00 00 00 00 00 00	() Villness recognized	SLASS 6 FELONY EXECUTED by arresting the Accused named above is day:	11 L1 OG 50 BATE AND TIME OF SERVICE B. Prevalence of Arresting Officer	EADGE NO., AGENCY AND JURISDICTION	SHERIFF	Short Offense Description: ABDUCTION: BY PARENT, REMOVE FROM STATE O O	190604651	OR ADMINISTRATIVE USE ONLY Virginia Crime Code:	KIU-1013-F6
CASE NO.	General District Court Criminal Traffic Accused: (IN) Invenile and Domestic Relations District Court BUSH, DAVID LASTINA 105 CREEK DR	FO A. AUTHORIZED OFFICER: You are hereby commanded in the name of the Commonwealth of Virginia forthwith to arrest and	oring the Accused before this Court to answer the charge that the Accused, within this city or county, on or about 10/13/2006 to 10/25/2006 did unlawfully and feloniously in violation of Section	18.2–47 , Code of Virginia: W M is the child of the accused. IBR#20061024-0028.		on th	NOV 2 2 2006 Dity of Richmond Juvenile & Donnestlic Relations District Court		use to believe that the Accused committed	Complainant.	RK X MAGISTRATE TUDGE 5	AMPLE IN DATA BANK of or this arrest:	RE is Required NRM DC-312 (FRONT) REVISED 7/05